


## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	COMPOSITE ART WORK AND PROCESS FOR PRODUCING THE SAME	
Application Type : regular, utility Attorney Docket Number : LUZ016PU		
Correspondence address: Customer Number: 22948		
		
<b>Inventors Information:</b>  <u>Inventor 1:</u> <b>Applicant Authority Type:</b> Inventor <b>Citizenship:</b> IL <b>Given Name:</b> Aharon <b>Family Name:</b> SHAKED <b>Residence:</b> <b>City of Residence:</b> Lod <b>Country of Residence:</b> IL <b>Address-1 of Mailing Address:</b> 4 Alei Koteret Street <b>Address-2 of Mailing Address:</b> <b>City of Mailing Address:</b> Lod <b>State of Mailing Address:</b> <b>Postal Code of Mailing Address:</b> 71453 <b>Country of Mailing Address:</b> IL <b>Phone:</b> <b>Fax:</b> <b>E-mail:</b>  <u>Inventor 2:</u> <b>Applicant Authority Type:</b> Inventor <b>Citizenship:</b> IL <b>Given Name:</b> Amos <b>Family Name:</b> AVRAHAM <b>Residence:</b> <b>City of Residence:</b> Lod		

**Country of Residence:** IL  
**Address-1 of Mailing Address:** 6 San Martin Street  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Lod  
**State of Mailing Address:**  
**Postal Code of Mailing Address:** 71279  
**Country of Mailing Address:** IL  
**Phone:**  
**Fax:**  
**E-mail:**

**Attorney Information:**

practitioner(s) at Customer Number:

22948



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

**Publication Information:**

Suggested Figure for Publication - 1

Suggested Classification -

Suggested Technology Center -

Total Number of Drawing Sheets - 8

**Assignee 1:**

**Organization Name:** ASPAKLARIA Import/Export and Marketing  
Picture Frames (1999) Ltd.  
**Address-1 of Mailing Address:** 16 Hamacabim Street  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Rishon Lezion  
**State of Mailing Address:**  
**Postal Code of Mailing Address:** 75359  
**Country of Mailing Address:** IL  
**Phone:**  
**Fax:**  
**E-mail:**